									10/694554					
	*			•	Application or Docket Number									
	PATENT	ORE	PRD 444-128-29-6-3											
	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
Г	TOTAL CLAIM	S	10].	RATE	FE		RATE			
FOR			NUMBER FILEO		NEUTA	BER EXTRA		BASIC F	-		BASIC FE			
TOTAL CHARGEABLE CLAIMS			10 minus 20=			0		X\$ 9≠		OF	X\$18=	0		
ľ	DEPENDENT	CLAIMS	2 minus 3 =		<u>. </u>	0		X43=	\top		X86=	Ø		
Ľ	ULTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT		0		+145=	1	OF		0		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	╁—	-los		170		
	•		SMALL	ENTITY.	OR		THAN ENTITY							
NTA		(COLUMN 1) CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHE NUMBE PREVIOU PAID FO		PRESENT EXTRA		RATE	ADDI TIONA FRE	7	RATE	ADDI- TIONAL		
AMENDMENT	Total	. 10	Minus	- 2		. —		X\$ 9=	17	OR	X\$18=	FER		
3	Independent • 2		Minus :				lit	X43=	1/	OR	V00	1-/-		
L	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		 	+145=	1	OR	+290=			
								TOTAL DOTT. FEE		OR	YOYAL ADOIT, FEE			
7-24-of (Column 1) (Column 2) (Column 3)												1		
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOL PAID F	EA USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE]	RATE	ADDI- TIONAL FEE		
MON	Total	. 10	Minus	* 21	,	- /	Ιſ	X\$ 9=	,	OR	X\$18=			
AME	Independent	• 2	Minus	1 3		- /		X43=	/	OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								/	1	+290=			
		L	+145=	-/-	OR	TOTAL								
ADDIT. FEEOH ADDIT. FEEOH														
U	`	CLAINS REMAINING		HIGHE:	51	(Column 3)	Г		ADDI-	1 1		ADD4-		
ENDMENT		AFTER AMENDMENT		PREVIOU PAID FO	SLY	EXTRA	L	RATE	TIONAL FEE		RATE	TIONAL		
9	Total	•	Minus	**		σ	Γ	X5 9=		ОЯ	X\$18=			

PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

**If the "Highest Number Provincisty Paid For" IN THIS SPACE is less than 20, enter "20.

**If the "Highest Number Provincisty Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Provincisty Paid For" (Total or Independent) to the highest number tound in the appropriate box in column 1. OR ADDIT. FEE

FORM PTO-675 (Rev. 1003)

independent .

PROTEINS TORRESON CROS. U.S. DEPARTMENT OF COMMERCE

OR

OR

X86-

+290=

X43.

+145=